

CAP-MR/DD Waiver Q and A
May 5, 2005

Issue	Question	Response
Targeted Case Management	Will individuals who have a human service degree but not the required number of years of experience have the opportunity to gain the experience?	At the time of implementation of the Targeted Case Management, if an individual has a degree in a human service field but does not yet meet the required number of years experience they may continue to provide case management services for up to the next 24 months, at which time they would meet the requirements of the definition. However, after the implementation of the definition no new case managers will be qualified to provide the service without having the required experience.
Targeted Case Management	What constitutes a human service degree?	A document has been prepared by the Office of State Personnel, Local Government Services entitled <i>Guidelines for Evaluating Human Services Degrees</i> . The Office of State Personnel should be contacted for this information at www.osp.state.nc.us or 919-733-7108.
Targeted Case Management	Will TCM be authorized by a statewide vendor or the LME?	The LME is responsible for authorizing TCM.
Targeted Case Management	What are the staffing requirements for TCM?	Masters degree in a human services field plus one year experience in DD or bachelors degree in a human services field plus two years experience in DD or an RN with two years experience in DD.
Targeted Case Management	At the implementation of the new waiver, will service orders for TCM need to be completed or will the first orders be done at the time of the first CNR?	Discussions are taking place regarding this issue.
Targeted Case Management	Will current case managers who are QPs but do not have human service degrees be grandfathered in?	Yes, but with a 5 year sunset. Within 5 years they must meet the requirements to continue to perform Targeted

		Case Management activities.
Targeted Case Management	Will current case managers who are QPs but do not have the required number of years of experience be grandfathered in?	By definition, to be a Qualified Professional, the person has the required years of experience.
Targeted Case Management	Is the required experience pre- or post- graduate? Does the experience have to be professional or can it be paraprofessional?	Post graduate. The experience may be professional or paraprofessional, as long as it occurs post-graduation.
Targeted Case Management	Will the CAP-MR/DD definition of QP and AP be changed to reflect the new definition for TCM?	QP and AP are defined in Rule, which is not going to change. However, TCM staffing requirements excludes individuals whose degrees are in a non-human service fields.
Direct Care Staff Education and Training	Will the current CAP competencies still be required in the new waiver?	No. Training of direct care staff will be according to DMH/DD/SAS Rules, in addition to any consumer specific training that is identified in the person centered plan.
Direct Care Staff Education and Training	What are the education requirements for paraprofessionals?	This information may be found in rule at 10A NCAC 27G.0103 (b) (14).
Direct Care Staff Education and Training	Can parents continue to provide waiver services to their adult children?	Yes, however, the parent must meet the provider qualifications for the service.
Direct Care Staff Education and Training	Will there be cultural competency requirements for staff?	Training is being developed to be inclusive of cultural awareness.
MRMI	Do MRMI funds need to go on the cost summary?	No. MRMI services need to be reflected on the person centered plan, but costs are not reflected on the cost summary. The LME will be responsive for tracking the cost of these services separately.
Frequency of Waiver Services	How often must a consumer receive a waiver service to remain on CAP?	This is an issue that CMS has been looking at closely in other states. The Division is waiting for policy guidance from CMS. However, we anticipate the expectation to be that a consumer will receive at least one direct waiver service (i.e. excludes equipment, supplies, etc.) per month to remain on the waiver.

Local Approval	Do LMEs have to revise their local approval plans for the new waiver?	If a component of a local approval plan is not consistent with the new waiver, the plan must be revised. DMH recommends that all LMEs review their local approval plans to ensure they are in compliance with the new waiver.
Local Approval	Do revisions to LME local approval plans have to be submitted to DMH or DMA for review?	No. Revisions to local approval plans do not need to be submitted to DMH or DMA. However, revised plans must be sent to the DMH Accountability Team at the time of notification of an upcoming local approval review.
Local Approval	What is DMH's timeline for reviewing plans of care with budgets in excess of \$85,000?	DMH will review plans within 5 business days of receipt.
Service Orders	Who completes the service order?	The case manager completes the service order, which indicates the frequency and duration of a service, and sends it to the provider agency after the LME authorizes (through local approval) the plan of care.
Residential Supports	Can state funded personal assistance be provided when a consumer is receiving Residential Supports?	No. Periodic services, including Personal Assistance cannot be provided while a consumer is receiving Residential Supports. This would be a duplication of services.
Residential Supports	How do you add another service to Residential Supports if a maximum number of hours are not specified?	There is not a specific number of hours attached to any of the levels of Res Supports since the duration of the service is based on the needs of the individual as outlined in the person centered Plan of Care. Provision of any other service on the same day, such as Day Supports or Respite, would not occur at the same time of day in which outcomes identified in the plan being addressed through Res Supports were being worked on.
MR2	Who submits the MR2 to Murdoch Center, the LME or the case manager?	The LME is responsible for submitting the MR2 to Murdoch Center as this is considered to be a function of the service authorization process, which is an LME

		responsibility.
Day Programs	Can Personal Care be provided in a day program?	No. Individuals who need supports to attend a day program will receive Day Supports, which includes a personal care component.
Day Programs	Is an ADVP a licensed setting?	According to 10A NCAC 27G.2300, ADVPs are subject to licensure.
Day Programs	If an individual receives CAP services in an ADVP, is the ADVP required to provide the waiver services?	If an individual chooses to have their day programming at an ADVP, then by default they are choosing the ADVP as their provider of CAP services in the day program.
Diagnostic Assessment	What is meant by the biological component in Diagnostic Assessment?	DMH is posting a separate Q&A document regarding Diagnostic Assessments. Please refer to that document.
Diagnostic Assessment	Can current DD or CAP consumers receive Diagnostic Assessments?	If needed, Diagnostic Assessment can be completed annually. There must be a clear justification of need.
Diagnostic Assessment	For an individual already receiving waiver services, will a Diagnostic Assessment be required with implementation of the new waiver?	Diagnostic Assessment is not a requirement for current waiver recipients unless the need for a comprehensive assessment is identified.
Utilization Review Guidelines	With implementation of the new waiver, is UR applied when a consumer's level of service increases (i.e goes from SL 1 to Residential Supports 2)?	Yes. When there is an increase frequency and/or duration of service, the addition of a service, or a change in level of service, UR is applied.
Utilization Review Guidelines	Will an individual's services be cut based on the implementation of the UR Guidelines?	No. The guidelines are not a means to cut services.
Documentation	How do case managers sign documentation?	Documentation requirements are outlined in the Service Records Manual.
Letter to Consumers/Families	In the statewide CAP training sessions, DMH staff informed participants that a notification letter regarding transition to the new waiver must be sent to all waiver participants and/or their guardians. Who maintains copies of this letter?	LME maintains a copy of the letter and sends a copy to the case manager for the permanent record.
Psychological Evaluations	If an adult presents to the LME requesting waiver services but does not have documentation substantiating	Yes. A psychological evaluation would be completed that documents current level of functioning and

	a diagnosis of MR prior to age 18 or DD prior to age 22, but screening indicates potential eligibility for DD target population, is there a mechanism for establishing eligibility for the waiver?	historical information would be pursued to substantiate prior diagnosis.
Enrollment	Do LMEs have to enroll to provide waiver services?	LMEs need to enroll if they have yet to divest of all their direct waiver services. LMEs must continue to be enrolled for services that only LMEs are authorized to bill (i.e. Home Modifications, Vehicle Adaptations).
Individual/Caregiver Training	Is it permissible to attend out of state conferences?	Yes, but travel costs are not covered.
AFLs	Is a private home where an adult receiving waiver supports lives with natural family and another adult on the waiver moves into the home subject to licensure?	No. This situation is considered to be a one person AFL, which does not require licensure.
AFLs	Is a home in which an adult lives with their parent who is providing the waiver services an AFL?	No. An unlicensed AFL is an out of home placement; an adult child living in the home of his/her natural or adopted parents is not living in an AFL. An AFL for one person is provided as an out of home placement for a person who chooses this setting or whose family cannot provide care for that person. The individual receives 24-hour care from and lives in a private home with a family in a home environment where the services are for the care and/or habilitation of the individual. The home does not require a license because it serves only one adult with a developmental disability. Individuals living in these one person settings with their families will receive Home and Community Supports and/or Personal Care if identified in the Plan of Care.
Manual	When will the new CAP Manual be available?	The draft manual is in process. It has to go through a number of review and approval processes before it can be made available. It will be posted on the DMH website as soon as possible.

Waiver Development	How do families become involved in proposed changes in the waiver?	One way for families to be involved is to frequent review the DMH website, where draft materials are posted for public comment. Also, you can contact your local CFAC (Consumer and Family Advisory Committee) and your LME to let them know of your interest to get involved.
Waiting Lists	How will implementation of the new waiver effect LMEs waiting lists?	LMEs will continue to follow their local prioritization process and remain aware of funding availability within their CAP allocation.
Privatization of Case Management	In the reform and variable remuneration of case management (privatization), how do parents get assistance in being sure that the majority of case allotment goes to getting the best service possible for consumers?	We are not sure of the meaning of this question; however with the privatization of case management, consumers/families continue to have the choice of case management agencies and may change providers at any time by contacting their LME.
Enhanced Personal Care and Enhanced Respite	What are the criteria for an individual to receive Enhanced PC or Enhanced Respite? How can they be obtained?	It is for individuals with significant medical and/or behavioral challenges as identified in the person centered plan and by the NC SNAP. Individuals must have a SNAP index score that places them in level 3 or 4 on the Utilization Review Guidelines. The UR Guidelines will be posted to the DMH website as soon as they are finalized.
Miscellaneous	Is Relationship Development Training available under the new waiver?	This type of training <u>might</u> be appropriate under the Individual/Caregiver Training definition.
Miscellaneous	What will Community Inclusion, Day Hab and Supported Living be called in the new waiver?	Community Inclusion is not an available service in the current waiver. Day Hab will change to Day Supports. Supported Living could be Home and Community Supports or Residential Supports, depending on the residential setting. A crosswalk of services is posted on the DMH website.